

MAY-30-2003 FRI 03:21 PM

FAX NO.

P. 01

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TELECOPY COVER SHEET

DATE:

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<i>E. Ramon Albert</i>	<i>USPFO</i>		

From:

Brandon Boss

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Client/Matter:

Number of Pages:

09/21/757

OPERATOR:

TIME COMPLETED:

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FAX NO.

P. 05

Approved for use through 10/31/2002. OMB 0651-0032
 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
 Under the Paperwork Reduction Act of 1995, persons are required to respond to a collection of information if it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 110)

Complete if Known

Application Number	09/821,757
Filing Date	3/30/2001
First Named Inventor	Albert
Examiner Name	Yeon
Group / Art Unit	1714
Attorney Docket No.	041724.003

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit
Account
Number

Deposit Account Number	
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Deposit
Account
Name

Deposit Account Name	02-4300
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The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
101	740	201	370	Utility filing fee	
106	330	206	165	Design filing fee	
107	510	207	255	Plant filing fee	
108	740	208	370	Reissue filing fee	
114	160	214	80	Provisional filing fee	

SUBTOTAL (1)

(\$ 0)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	0	X 0	= 0
Multiple Dependent	0	X 0	= 0

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
103	18	203	9	Claims in excess of 20
102	84	202	42	Independent claims in excess of 3
104	280	204	140	Multiple dependent claim, if not paid
100	84	200	42	** Reissue independent claims over original patent
110	18	210	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES
Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
127	60	227	25	Surcharge - late filing fee or oath	
139	130	139	130	Surcharge - late provisional filing fee or cover sheet	
147	2,520	147	2,520	Non-English specification	
112	920*	112	920*	For filing a request for reexamination	
113	1,840*	113	1,840*	Requesting publication of SIR prior to Examiner action	
115	110	213	55	Requesting publication of SIR after Examiner action	
118	400	216	200	Extension for reply within first month	110
117	920	217	480	Extension for reply within second month	
118	1,440	218	720	Extension for reply within third month	
120	1,960	228	980	Extension for reply within fourth month	
110	320	219	160	Notice of Appeal	
120	320	220	160	Filing a brief in support of an appeal	
121	260	221	140	Request for oral hearing	
138	1,510	138	1,510	Petition to institute a public use proceeding	
140	110	240	55	Petition to revive - unavoidable	
141	1,280	241	640	Petition to revive - unintentional	
142	1,280	242	640	Utility issue fee (or reissue)	
143	480	243	230	Design issue fee	
144	620	244	310	Plant issue fee	
122	130	122	130	Petitions to the Commissioner	
123	50	123	50	Processing fee under 37 CFR 1.17 (q)	
126	180	126	180	Submission of Information Disclosure Stmt	
581	40	581	40	Recording each patent assignment per property (times number of properties)	
148	740	246	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
149	740	249	370	For each additional invention to be examined (37 CFR § 1.129(b))	
179	740	279	370	Request for Continued Examination (RCE)	
169	900	169	900	Request for expedited examination of a design application	

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$ 110)

SUBMITTED BY		Complete if applicable		
Name (Print/Type)	Brandon D. Bogg	Registration No. Attorney/Agent	48567	Telephone 202/263-4300
Signature			Date	1/27/03

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FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/821,757
Filing Date	3/30/2001
First Named Inventor	Albert
Group Art Unit	1714
Examiner Name	Yoon
Total Number of Pages in This Submission	Attorney Docket Number 041724.003

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers <small>(for an Application)</small> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <small>Change of Correspondence Address</small> <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <small>(Appeal Notice, Brief, Reply Brief)</small> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) <small>(please identify below):</small> <small>Remarks</small>
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm
or
Individual name

Brandon S. Boas - Reg 46567

Signature

Date

5/27/03

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: _____

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FAX NO.

P. 02

Postcard receipt: Please apply mail room stamp and return to:
POSTCARD RECEIPT--PLEASE APPLY MAIL ROOM STAMP & RETURN TO
SMITH, GAMBRELL & RUSSELL, LLP,

Attorney Docket: 41724W003

Applicant: Philipp Albert, et al.

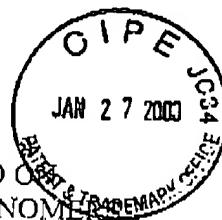
App. No.: 09/821,757

Filing Date: March 30, 2001

Design Mark: DENTAL MATERIAL BASED ON
CATIONICALLY POLYMERIZABLE MONOMERS

Attached:

AMENDMENT, TRANSMITTAL, FEE TRANSMITTAL FOR FY 2002, PETITION FOR
ONE MONTH EXTENSION OF TIME AND A CHECK FOR \$110.00.
January 27, 2003



3

MAY-30-2003 FRI 03:21 PM

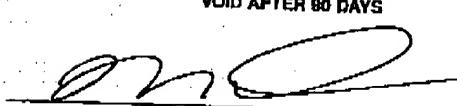
FAX NO.

P. 03

60215					
REF. #	INV. #	DATE	P.O. #	COMMISSIONER OF PATENTS	01-27-03
132675	041724003A	01-27-03	041724.003	INVOICE DESCRIPTION EXTENSION OF TIME	060215 110.00

TOTAL AMOUNT PAID:

110.00

SMITH, GAMBRELL & RUSSELL, LLP CLIENT DISBURSEMENT ACCOUNT SUITE 3100 PROMENADE II 1230 PEACHTREE STREET NE ATLANTA, GA 30309-3592		060215 SouthTrust Bank ATLANTA, GEORGIA	
PAY	ONE HUNDRED TEN AND 00/100 Dollars	01-27-03	\$*****110.00
TO THE ORDER OF	COMMISSIONER OF PATENTS	DATE	AMOUNT
		SMITH, GAMBRELL & RUSSELL, LLP VOID AFTER 90 DAYS	
			
#060215# 0061403056#590000436 8#			

SMITH, GAMBRELL & RUSSELL, LLP

DETACH AND RETAIN THIS STATEMENT
THE ATTACHED CHECK IS IN PAYMENT OF ITEMS DESCRIBED BELOW.
IF NOT CORRECT PLEASE NOTIFY US PROMPTLY. NO RECEIPT DESIRED.

060215

60215					
REF. #	INV. #	DATE	P.O. #	COMMISSIONER OF PATENTS	01-27-03
132675	041724003A	01-27-03	041724.003	INVOICE DESCRIPTION EXTENSION OF TIME	060215 110.00

TOTAL AMOUNT PAID:

110.00